



Kansas Self-Management Education Program Manual



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The Kansas Department of Health and Environment (KDHE) and the Kansas Foundation for Medical Care (KFMC) will be working with local organizations to promote the successful implementation of evidence-based self-management education programs to achieve the mission of improved health for individuals and communities. This Program Manual provides an overview of the structure of self-management education in Kansas to support the broad based adoption of self-management programming.

Introduction	1
Maintaining Program Fidelity	3
<i>Program Structure</i>	3
<i>Training & Certification</i>	4
<i>Program Fidelity Requirements</i>	6
Group Leaders	10
<i>Group Leader Skills</i>	10
<i>How Many Group Leaders Are Needed?</i>	11
<i>Where To Find Group Leaders</i>	12
<i>What Group Leaders Commit To</i>	12
<i>Retaining Group Leaders</i>	13
Workshop Participants	14
<i>Time</i>	14
<i>Systems</i>	14
<i>Scheduling</i>	14
Program Support	16

Appendix A | Program Structure

Appendix B | Data Collection

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Introduction

The Kansas Department for Health and Environment (KDHE) and the Kansas Foundation for Medical Care (KFMC) have collaborated to build a self-management education program in the state of Kansas. KDHE and KFMC are funded individually to deliver self-management education. Through collaboration, the programs can have far greater reach. The joint effort is known as Kansas Self-Management Education (KSME).

KDHE is a part of the executive branch of the Kansas government. Its mission is to protect and improve the health and environment of all Kansans. KDHE works with both larger governmental institutions such as the Centers for Disease Control and Prevention (CDC) and local organizations, such as health departments, to promote health throughout the state. The KDHE Bureau of Health Promotion is funded by the CDC to promote, implement and sustain self-management and prevention programs by partnering with the people of Kansas.



KFMC is continuing its goal to improve health outcomes and healthcare delivery for Kansas Medicare consumers as a member of the Great Plains Quality Innovation Network (QIN). The Great Plains QIN is composed of former standalone Quality Improvement Organizations in four states, Kansas, Nebraska, North Dakota, and South Dakota. Our common goal of improving health for Medicare consumers and combined resources will enable partners to access new expertise and perspectives to improve health outcomes and care delivery. The Lead Your Health | Self-Management Education programs target health consumers directly and are funded through a contract with the Centers for Medicare & Medicaid Services (CMS) contract.



The Self-Management Education (SME) programs were developed by the Division of Family and Community Medicine in the School of Medicine at Stanford University for people with chronic health problems, their caregivers, and families over a number of years beginning in 1996. Each program is evidence-based, unique and designed as a small-group workshop series to help people gain self-confidence in their ability to control their symptoms, better manage their health, and lead a fuller life. The workshops are facilitated by two trained leaders, one or both of whom are non-health professionals, in community settings (like libraries, senior centers, churches, etc.) over a specific time period (generally six weeks). Currently, there are five (5) SME English-language programs:

1. Arthritis Self-Management Program

The first self-management education program and the prototype for all subsequent self-management programs. The program is designed specifically for those with arthritis, their caregivers and significant others.

2. Chronic Disease Self-Management Program (CDSMP)

The program is offered to individuals with physical and mental chronic conditions, their caregivers and significant others. There is no limitation on the

type of chronic condition, which means participants will have a variety of conditions. The program teaches skills needed in the day-to-day management of treatment and to maintain and/or increase life activities.

3. Diabetes Self-Management Program (DSMP)

The program is designed specifically for those with type 2 diabetes, their caregivers and significant others.

4. Positive Self-Management Program

The program is a seven (7) week program for people with HIV. Subjects covered during the program include how to best integrate medication regimens into daily life, techniques for dealing with difficult emotions, exercise, nutrition, communication skills, evaluating symptoms and treatments.

5. Chronic Pain Self-Management Program

The program is designed for individuals who experience chronic pain of any type.

Four SME programs are available in Spanish (Chronic Disease, Arthritis, Positive Self-Management, and Diabetes). KDHE currently offers the Spanish Chronic Disease and Diabetes self-management programs, titled Tomando Control de su Salud and Programa de Manejo Personal de la Diabetes respectively.

SME programs do not conflict with existing programs or treatments. The programs are designed to enhance regular and disease-specific treatments and education programs. Multiple studies have demonstrated SME programs result in positive personal growth, reductions in healthcare expenditures, and an increase in the use of appropriate healthcare resources. *(Additional information on study results regarding SME programs can be found on the Stanford University Patient Education Research Center website at patienteducation.stanford.edu.)*

All workshops offered under the KSME collaboration must be offered under a license granted by Stanford University to KDHE or KFMC. Any SME programming provided under either license must meet all KSME Program Fidelity requirements.

Alphabet Soup

<i>KDHE</i> –	Kansas Department of Health and Environment, license holder for Stanford University programs
<i>KFMC</i> –	Kansas Foundation for Medical Care, license holder for Stanford University programs
<i>KSME</i> –	Kansas Self-Management Education
<i>CDSMP</i> –	Chronic Disease Self-Management Program
<i>DSMP</i> –	Diabetes Self-Management Program
<i>SME</i> –	Self-Management Education

Maintaining Program Fidelity

For the purposes of this manual, maintaining program fidelity refers to the requirements of ensuring the highest levels of quality and integrity in the design and implementation of KSME. Many of the requirements necessary to achieve this goal are dictated by the license granted to KDHE or KFMC by Stanford University, other requirements are deemed necessary to meet funding and/or contract requirements or may be the exclusive policy of KFMC or KDHE deemed necessary by business practices. In short, every effort has been made to ensure program fidelity is maintained, while providing the best possible experience for organizations and individuals expending time and resources offering KSME programming.

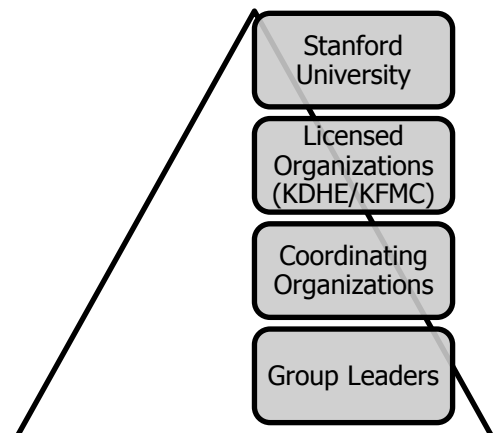
Program Structure

It is necessary to provide a basic overview for the purposes of program fidelity and provide context to the structure KSME programming.

Stanford University is the owner and author of all SME programming. Stanford University is responsible for establishing the minimum standards of all aspects of the programming, granting licenses, and ensuring program fidelity is maintained worldwide.

Licensed organizations, like KDHE or KFMC, purchase a license from Stanford which enables them to offer SME programming. The licensed organization is responsible for establishing a fidelity plan for programming offered under their license. This means the organization is making a long-term commitment to offer SME programs and has Master Trainers and/or Group Leaders on staff to support SME program offerings.

Basic SME Program Structure



Coordinating organizations are local organizations who agree to support SME programs in their communities. Coordinating organizations assume responsibility to assist KSME in coordinating programs, recruit, recommend and support individuals as Group Leaders, and recruit and/or refer individuals to participate in SME programs. Generally, coordinating organizations have identified an individual/employee to serve as an Area Program Coordinator to facilitate this work. (See *Appendix A | Program Structure for additional information.*)

Group Leaders are the heart of SME programming. They are volunteers and/or staff who have received training and are certified to serve as facilitators. Two leaders are necessary to facilitate each workshop and each must make the commitment to facilitate the entire workshop series. A Group Leader may be asked to partner with any certified Group Leader. While there are specific skills needed to be a Group Leader, there is not a defined list of qualifications concerning education, background, etc. Group Leaders

do not need to be health professionals. (See *Group Leaders*, page 10 for additional information.)

Training & Certification

As part of Stanford University's Program Fidelity, minimum requirements have been established regarding training and certification. KSME has established additional requirements to ensure program fidelity is maintained under the KDHE and KFMC Licenses.

Stanford University Training & Certification Requirements

Each SME program has specific training. The information below is provided for one (1) SME program. If an individual is trained and certified in more than one SME program, additional training and certification requirements may apply.

Who Trains Who & Who Facilitates What

	Group Leaders	Master Trainers	T-Trainers
Facilitate SME Workshop Series	•	•	•
Train Group Leaders		•	•
Train Master Trainers			•

Group Leaders are authorized to facilitate SME programs. Group Leaders do not train others. To become a Group Leader, one must satisfactorily complete a four-day Leader Training and have satisfactorily facilitated at least one workshop series within twelve (12) months after training. To maintain certification, Group Leaders must facilitate one workshop series every twelve (12) months. Every effort is made to remind group leaders of their recertification date, but group leaders are responsible for keeping track of their personal certification and maintaining it.

Master Trainers are authorized to facilitate SME programs and are authorized to train Group Leaders. To become a Master Trainer, one must successfully complete Master Training, serve as a Group Leader for a specified number of SME programs, and complete paperwork. To maintain certification, Master Trainers must conduct a specified number of Group Leader Trainings and/or facilitate a specified number of SME programs every twelve (12) months. Master Trainers are responsible for keeping track of their personal certification and maintaining it.

T-Trainers are authorized to facilitate SME programs, train Group Leaders, and train Master Trainers. To become a T-Trainer, one must complete an apprenticeship with Stanford University T-Trainers, co-lead one Master Training within twelve (12) months of the apprenticeship, and complete appropriate paperwork. To maintain certification, T-Trainers must conduct at least one Master Training every two (2) years, or conduct at least one Group Leader training, one Group Leader cross-training, or Master Trainer cross-training.

KSME Training & Certification Requirements

KSME has established a training and certification program for Area Program Coordinators. The half-day training is designed to help coordinators be successful in implementing SME programs and provides direction on how to assist in maintaining program fidelity under the KDHE or KFMC licensure.

Area Program Coordinators should identify themselves to KSME within one (1) week of assuming the role at a Coordinating Organization. Coordinators may contact either KDHE or KFMC to fulfill this requirement. Once identified, additional communication will be necessary and will be at the convenience of the Coordinator and KSME staff.

Area Program Coordinator Training is conducted by KSME staff and can be completed in a group setting or in a one-on-one training session. Each Area Program Coordinator **MUST** complete training within four (4) months of assuming the role and responsibility in the Coordinating Organization.

One group Area Program Coordinator Training will be conducted annually (minimally) at a central location. Notification of the training will be provided by KSME at least one (1) month before the event. One-on-one trainings may be scheduled at any time by contacting KSME Program Staff. If a one-on-one training is requested close to an annual event it will be at the discretion of KSME to determine if the one-on-one training will take place.

To maintain Area Program Coordinator certification, coordinators must complete an annual half-day update program. KSME will conduct the annual certification update program at a central location in conjunction with the Area Program Coordinator Training. Notification of the certification update program will be provided by KSME at least one (1) month before the event. Coordinators unable to attend the group meeting may contact the KSME Staff to discuss alternate arrangements.

A quarterly Area Program Coordinators Call will be hosted by KSME staff utilizing a toll free conferencing service. Participation on the calls is encouraged but not required. The calls provide opportunity for Coordinators to:

- Share ideas
- Brainstorm
- Discuss successes, barriers and lessons learned in implementing SME programing and serving as a Coordinating Agency
- Provide feedback to KSME staff

Area Program Coordinator Requirements			
	Initial Training	Certification Update	Coordinators Call
When	Within 4 months of assuming role	Annual	Quarterly
Provided/Coordinated By	KSME Staff	KSME Staff	KSME Staff
Method	<u>Group</u> Face-to-Face <u>One-on-One</u> Face-to-Face Alternate methods available if necessary	<u>Group</u> Face-to-Face Alternate methods available if necessary	Conference Call
Required	Yes	Yes	No

Program Fidelity Requirements

KSME is a joint collaboration between KDHE and KFMC. Group Leaders and Master Trainers may offer SME programming and/or Group Leader Training under any licensed organization. It is the responsibility of the Group Leader and/or Master Trainer to understand whose license they are operating under, if the license is current, and if it includes the SME program being offered. For the purpose of this manual, the assumption is SME programming offered is under either the KDHE or KFMC license. Deviation from the following requirements will violate the fidelity of either license and is not acceptable.

Program Length – KSME has elected to offer a Zero Meeting as a part of the workshop series*. This means the workshops will run for seven (7) weeks (one (1) Zero Meeting offered the week before workshop programming begins + six (6) weeks of Stanford workshop programming). The Zero Meeting acts as an informational session for participants interested in learning more about the program and determine if it is a good fit for them. It enables a brief introduction of the sponsoring and licensing organizations, and is advised to be conducted by the Area Program Coordinator and/or KSME Staff with the Group Leaders. The Zero Meeting should be held in the routine workshop location, scheduled to begin at the normal start time for the workshop series and last one (1) hour. Subsequent workshops should be scheduled for not less or more than two and one-half (2.5) hours per Stanford University guidelines.

**Conducting a Zero Meeting has not been a requirement under the KDHE license. Because of the benefits of offering the Zero Meeting for leaders and participants, all leaders trained by KDHE should plan future workshops to include a Zero Meeting.*

Program Content – Content of the Zero Meeting may be amended with permission from KSME staff. The SME programming content designed and licensed by Stanford University cannot be altered, edited, or amended in any way for any reason or circumstance. Guest speakers are not permitted at the Zero Meeting or during the workshop series.



Group Leaders – Two certified Group Leaders must lead each session of the workshop. The processes, group dynamics, and modeling are best managed and facilitated when

two Group Leaders are present. In extraordinary and/or emergency circumstances one workshop session may be led by only one Group Leader. In the event of Group Leader drop-out, please contact KSME staff for assistance in identifying alternate Group Leaders. For CDSMP workshops, at least one (1) Group Leader must have a chronic physical or mental condition. Ideally, the second Group Leader is currently acting or has acted as a caregiver for an individual with a chronic physical or mental condition. For DSMP workshops, at least one (1) Group Leader must have diabetes.

Program Location – The following items should be considered or are mandatory when determining a location for SME programming:

- All SME programming must be offered in handicap accessible locations. Many community settings are handicap accessible, but it is advisable to visit a potential location prior to scheduling a workshop series. Additionally, the location must have handicap accessible bathrooms. Bathrooms located close to the workshop room are ideal.
- Program locations must accommodate the maximum number of participants for the workshop, not more than twenty (20) participants in a circle or U configuration. Additionally, program locations should provide privacy and be able to accommodate flip charts, white boards, small group work (limited) and participants and/or Group Leaders who use wheelchairs or scooters.
- Chairs are required for all participants and Group Leaders.
- At least one (1) table is required for Group Leader use during the workshops. Tables and/or desks for participants are not required but can be used if available.
- Parking must be available close to the entrance and be handicap accessible.
- The building entrance and parking areas should be well lit if the workshops will be held after dark.
- Program locations must be open to having anyone from the community attend and have liability insurance coverage.

Data Collection – Stanford University requires all licensed organizations to submit data on SME programming offered under a license. Additionally, KSME requires data to be collected and submitted for the purposes of quality and to meet contract requirements. Data collection has been made as simple as possible for participants, Group Leaders and Area Program Coordinators. Data collection must be completed by all workshop participants and sent to either KDHE or KFME, whichever license you are facilitating your workshop under, within one week of the completion of a workshop. All forms will have one of the following logos in the upper-left/right corner of the document, which indicate where completed forms are to be sent by mail or email:

Logo	Mail To	Email To
	KDHE – Self-Management Education Kansas Optimizing Health Program 1000 SW Jackson, Suite 230 Topeka, KS 66612	<i>aunselt@kdheks.gov</i>
	KFMC – Self-Management Education Lead Your Health 2947 SW Wanamaker Drive	<i>healthengagement@kfmc.org</i>

	Topeka, KS 66614	
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The following is a brief overview of data collection tools used in KSME programming (see *Appendix B | Data Collection for samples*):

SME Program Scheduling Worksheet* – To be completed by Area Program Coordinators and submitted as soon as possible upon scheduling an SME program but not less than two (2) weeks before an SME program starts. The Program Scheduling Worksheet should be sent to whichever organization, KDHE or KFMC, is the license holder you are facilitating under.

SME Program Attendance* – To be completed by workshop participants each week of the workshop including the Zero Meeting.

Workshop Registration* – To be collected from each participant by the conclusion of the first workshop. Registration information that may be provided prior to the Zero Meeting, at the Zero Meeting and at the first workshop.

Self-Efficacy* – To be collected from each participant by the conclusion of the first workshop and at the conclusion of the workshop series. This tool is provided by Stanford University and is an approved evaluation/data collection tool for use in SME programming. It is designed to measure changes in participants' self-efficacy over time. The first collection is easy; it is part of the registration packet. The second collection point, the conclusion of the workshop can be more challenging, but every effort should be made to obtain a completed survey from each participant.

Patient Activation Survey* - To be collected only from workshop participants that have Medicare, both Original Medicare and/or a Medicare Advantage Plan. This must be completed by all participants who have Medicare, both pre and post workshop.

Six-Month Follow Up* - KSME will follow up with participants six months post workshop with a Self-Efficacy survey. Group leaders will pass participation for six month follow up at last workshop. This is designed to collect long-term effects of the programs for Kansas residents.

*Group Leaders may obtain copies of the data collection tools and postage paid envelopes from KSME staff or the Area Program Coordinator coordinating the workshop series. **Completed tools should be sent to the appropriate KSME staff within one week of the conclusion of the first workshop and within one week of the conclusion of the last workshop.**

Participant Minimum Qualifications – ALL participants must have a chronic physical or mental condition OR be a caregiver for an individual with a chronic physical or mental condition.

Number of Participants – All programs must have at least six (6) participants. The maximum number of participants cannot exceed twenty (20).

Supplies – Workshop supplies are provided by KSME to Area Program Coordinators or directly to Group Leaders. Supplies should be requested from the organization with the license in which you plan your workshop. Supplies should be requested at least two (2) weeks prior to the Zero Meeting. *KDHE will be able to offer supplies other than books/cds to coordinating organizations after July 2015.*

Use of Technology – Beyond the use of a CD player (included in the supply package furnished by KSME), NO additional technology should be used. This includes, but is not limited to, preprinted flip-charts, PowerPoint slides, and offering programming by teleconference, webinar, or other non-face-to-face setting.

Program Materials – The program materials for participants are furnished by KSME and should be requested at least two (2) weeks prior to the Zero Meeting.

All participants should receive a copy of the following:

1. *Living a Healthy Life with Chronic Conditions* (paperback book)
2. *Relaxation for Mind and Body Pathways to Healing* (audio CD)

Group Leaders

The design of the SME programs rely on high-quality Group Leaders. The availability of good Group Leaders is a key to the success of building and sustaining SME programming in an area and supports the workshop participants in achieving positive life changes.

There are numerous ways to identify and recruit Group Leaders. The techniques an organization uses to identify and recruit Leaders will vary. For this reason, no specific guidance is provided on the topic. Rather, information is provided to assist in the development of appropriate recruitment and retention techniques.

Over the years, Stanford University has determined the drop-out rate for trained Group Leaders can be as high as thirty percent (30%); meaning once a Group Leader is trained they never facilitate a workshop. While some drop-out should be anticipated across all levels (Group Leaders, Participants, etc.) establishing an effective recruitment and retention plan goes a long way to reducing the drop-out rate, enables effective and efficient utilization of resources and promotes higher satisfaction rates among Group Leaders.

KSME staff can assist Area Program Coordinators in developing a recruiting and/or retention plan upon request. Additionally, KSME staff welcomes feedback from Area Program Coordinators on recruiting and retention issues and encourage active discussion on this topic during Quarterly Coordinating Calls.

Group Leader Skills

While there are no specific education or experience requirements or qualifications, there are some skills that must be evaluated when considering who might become a good Group Leader:

- Group Leaders must be able to read, speak and write English if conducting an English based workshop (CDSMP or DSMP). Group Leaders have to be able to read and follow the Leader's Manual and conduct the activities in the manual. This DOES NOT exclude individuals who are not native English speakers.
- Group leaders leading a Tomando de Control or Spanish Diabetes must be able to read, speak, and write Spanish. Group leaders have to be able to read and follow the Leader's Manual and conduct the activities in the manual in the Spanish language.
- Group Leaders should reflect the demographics, or make-up, of the community. This is especially important when considering issues of gender, cultural backgrounds, race or ethnicity and who the programming is intended for. While SME programs are designed to be culturally neutral, Group Leaders can influence cultural appropriateness, workshop registration and attendance, and the ability to sustain SME programming in a community.
 - Example 1: If a program is being given for a Native American community, having Group Leaders who are Native American can make participants

- feel more comfortable and increases the perceived cultural appropriateness of the program.
- Example 2: While women will attend workshops with any ratio of men to women, men are more comfortable in groups featuring at least one male Group Leader.
- Group Leaders should desire to become Group Leaders because they want to serve others.
- SME programming is designed to promote self-management. Group Leaders should demonstrate appropriate self-management skills. This does not mean the individual must meet certain requirements or a specific definition of self-management, rather the individual should have a grasp of what it means to self-manage and an ability to achieve, promote and demonstrate that skill to others as included in the SME programming.
- Individuals should be in good enough health to serve as a Group Leader. This does not mean an individual has to meet any specific health requirements, rather they should be able to commit to the physical, mental, time, and other requirements necessary to facilitate at least one (1) workshop series a year.
 - IMPORTANT NOTE: This does not exclude individuals in wheelchairs, scooters, or who use oxygen or other medical devices in their daily lives, or who are undergoing treatment(s) for their condition.

Not every individual who has the skills listed above will become a Group Leader. It is possible Group Leader candidates may not satisfactorily pass the Group Leader training. And, just because someone passes Group Leader training, and has the necessary skills, doesn't automatically translate into success in actually facilitating a workshop. In other words, despite every attempt to recruit the "right" kind of people as Group Leaders, drop-out will still occur.

A special note about healthcare professionals. Stanford University recommends that Group Leaders be lay people (individuals with no specific health training). This does not mean healthcare professionals cannot be effective Group Leaders. If a healthcare professional desires to be a Group Leader and has the necessary skills, they should be considered as a candidate. The challenge for healthcare professionals in this program is they must remove their healthcare professional hat, which means they cannot answer health-related questions and must adhere to the Stanford University content. The Group Leader Training, developed by Stanford University, provides an opportunity for healthcare professionals to understand the program, content, leader role and provides guidance to healthcare professionals on the boundaries necessary to be a successful leader.

How Many Group Leaders Are Needed?

The number of Group Leaders needed to begin and sustain SME programming in a community or area depends on many factors. At a minimum, KSME recommends each Local Coordinating Agency identify, recruit, and send at least four (4) individuals to Group Leader Training to ensure an appropriate number of Group Leaders are available to support SME programming in an area or community.

MATH BREAK: Assuming a Local Coordinating Agency has four (4) certified Group Leaders and each leader commits to facilitating one (1) workshop per year, and each workshop includes twelve (12) participants, this would result in twenty-four (24) individuals in the community receiving SME programming each year. If an organization wishes to reach more individuals in the community Group Leaders will need to commit to facilitating additional workshops or additional Group Leaders will need to be identified and certified as Group Leaders.

Where To Find Group Leaders

Group Leaders can be discovered almost anywhere! Following are just a few likely locations to find Group Leaders:

- Referrals from local healthcare providers,
- Community and Activity Groups (like Red Hat Society Clubs),
- Through advertisements and/or stories in local media outlets (print, TV, radio) and local group newsletters,
- During recruitment visits to local community groups,
- Existing support groups,
- At church, the grocery store, among friends...virtually anywhere!

As a reminder, each workshop requires two (2) certified Group Leaders. For this reason, it can be beneficial to recruit in pairs. Regardless of the recruitment techniques, it is a good idea to know before training that all potential Group Leaders can, would and will work together in any combination of pairs.

What Group Leaders Commit To

At a minimum, Group Leaders are committing to the following:

- Four (4) days of training to achieve certification. This training can be accomplished in four (4) consecutive days of training, or across a two (2) week span with two (2) days of classes per week. KSME Master Trainers will work with Area Program Coordinators to identify the optimal Group Leader Training format.
- Facilitating at least one (1) SME program they are certified in each year to maintain Group Leader certification.
 - This includes, but is not limited to,
 - hosting the Zero Meeting for interested participants,
 - working with the co-leader in advance of the first workshop to discuss and plan who will lead the sessions, and
 - preparing charts for the workshop series.
- Maintaining program fidelity as defined by Stanford University and the KSME standards.

Retaining Group Leaders

There is no specific retention program for Group Leaders, but there are some general guides Stanford University has discovered during their tenure implementing SME programming.

Leaders are special and need to feel special. There are a variety of simple and common sense ways Coordinating Organizations and Area Program Coordinators can help Group Leader feel special.

- Treat Group Leaders with dignity, respect and professional courtesy.
- Get to know Group Leaders. Individuals decide to become Group Leaders and maintain their commitment to leading SME programming for a variety of reasons. Talking with Group Leaders not only helps establish a relationship, it helps Coordinators identify how to help Group Leaders be successful and find satisfaction in their service.
- Let Group Leaders know they are valued. There are numerous ways to accomplish this. One example is sending birthday and/or holiday cards.
- Host a special Group Leader event at least annually. This could be luncheon or other special event to recognize Leaders for their service and accomplishments.
- Don't let Group Leaders drop-out without asking why. Gently probe as to why a Group Leader no longer wants to facilitate. While the answer can be as easy as "I just don't have the time" there may be other reasons a leader decides to drop-out. Encouraging and accepting honest feedback is an important learning opportunity for the Coordinator and KSME. KSME can provide assistance with group leader retention goals, if desired.

Workshop Participants

KSME staff have developed a toolkit to assist in program implementation, which includes significant resources for marketing and recruitment purposes. Additionally, KSME staff can assist Area Program Coordinators in developing and implementing workshop promotion and participant recruitment programs. KSME staff welcomes feedback from Area Program Coordinators on these topics and encourages active discussion during Quarterly Coordinating Calls.

Before planning a SME workshop it is ideal to identify the target audience. As stated previously, the CDSMP workshop content is designed for anyone with a physical or mental chronic condition and their caregivers or significant others. The DSMP workshop content is designed for any individual with diabetes and their caregivers or significant others. The same guidelines apply for the Spanish based programs. This can be a very large target audience, so it is best if the target audience is narrowed. Defining the target audience can include a specific neighborhood, church group, or an entire community. As long as the Area Program Coordinator is able to fill the workshop with at least six (6) participants the workshop can take place. Once the target audience has been established, defining the logistics and developing and implementing marketing for the workshop becomes more focused.

Recruitment is a function of three (3) factors: time, systems and scheduling. Each of these functions will be examined in more detail below.

Time

Successful participant recruitment takes time. Depending on the desired number of individuals a Coordinating Organization and/or Area Program Coordinator want to reach, the amount of time needed to recruit participants can vary widely. Coordinating Organizations and Area Program Coordinators are encouraged to set ambitious, but attainable, goals regarding the number of individuals they wish to reach. This is one of the reasons KSME asks that Coordinating Organizations identify Coordinators who will be able to devote time to implementing SME programming consistent with established goals.

Systems

One of the ways to utilize resources efficiently is to capitalize on existing and/or create systems that can help streamline the recruitment process. Two simple databases, which can be created in Excel and are included in the Toolkit, can help Coordinators maximize recruiting efforts:

- **Potential Participants.** This database should be established as soon as an organization becomes a Coordinating Organization and has identified a Coordinator. The purpose of this database is to keep track of all the people who may have expressed interest in participating in a SME workshop. Name and relevant contact information, including address, phone and email, should be

included along with the particular workshop they are interested in (CDSMP or DSMP). Additional information about this database is included in the Toolkit.

- **Publicity Sources.** This database may already exist at Coordinating Organizations in the marketing or communications areas. Like the Potential Participants Database, it should be shared or established as soon as possible. The database can include traditional publicity resources, like newspapers, but should also include more specialized resources like community and organization newsletters, church bulletins, websites, community calendars, and other local sources that can assist in attracting participants to workshops. The publicity source name, relevant contact information, contact person, publication schedule and deadlines should be included. Additional information about this database is included in the Toolkit.

Scheduling

Scheduling covers a lot of factors. The following are fundamental scheduling issues to consider but may not be inclusive of all issues necessary for success.

- **Timing.** The target audience will influence the timing of workshops. For example, senior citizens are more likely to desire a daytime workshop series. In addition to the time of day, timing also includes the time of year. It is best to schedule workshops so they end by the second week of December to accommodate the busy holiday season. Weather can also be a factor in determining the right time of year for starting or ending workshops.
- **Group Leader Availability.** The workshops cannot happen without participants or Group Leaders. It is a good idea to identify potential Group Leaders immediately once a likely time has been established for a desired workshop.
- **Location.** Once workshop timing has been addressed and potential Group Leaders identified, the next step is to identify a location. When considering locations, refer to page 7 for location requirements for program fidelity purposes. Additional considerations should include the target audience. For example, if public transportation is important to participants being able to attend, the ideal location may be on established routes. It is best to find FREE locations for the workshops and locations where the target audience is comfortable. In many instances this might include the public library, senior or community centers, or similar locations. The comfort of participants and Group Leaders should be the primary concern when selecting a location.
- **Marketing.** Promoting workshops can be systematized and adapted to meet the needs of the local environment. A complete marketing timeline is included in the Toolkit and can be used as a guide for workshop promotion and participant recruitment.

Program Support

KSME staff are prepared to offer support to Coordinating Agencies, Area Program Coordinators and Group Leaders. Any questions or support needs should be sent to the KSME staff at either KDHE or KFMC, whichever license you plan to facilitate workshops under. This includes, but is not limited to, specific medical questions arising from a workshop session, assistance in developing a Group Leader recruiting or retention plan, recruiting workshop participants, and workshop scheduling issues. All attempts will be made to respond within one (1) business day.

In the event of an emergency, Group Leaders should exercise sound judgment and contact first responders, if appropriate, and follow the guidelines established by the Coordinating Organization. Area Coordinators should be comfortable providing a cell phone or after hours contact to Group Leaders conducting workshops outside normal business hours. Following an emergency, it is expected the Area Program Coordinator and/or Group Leaders will reach the KSME staff the next business day.

Appendix A | Program Structure

Coordinating Organizations

There are no criteria on what type of entity can become a coordinating organization. KSME is working under the assumption that coordinating organizations will be local entities, which may include physician practices, hospitals, libraries, senior centers, local health departments, churches or other entities. The common thread among all coordinating organizations will be the strong desire to provide SME programming to individuals in their service areas as an evidence-based intervention tool and a commitment to improving the health of individuals and communities. This desire will require long-term support and commitment to SME programming, which may necessitate monetary, resource and other support from the organization to augment the services and coordination provided by KSME.

A requirement of coordinating organizations is designation of at least one staff or volunteer to serve as an Area Program Coordinator. The level of commitment (ie time) required of this individual will vary based on a number of factors, including the number of workshops planned/held and/or the number of participants the organization desires to reach.

MATH BREAK: Assuming a Local Coordinating Agency has four (4) certified Group Leaders and each leader commits to facilitating one (1) workshop per year, and each workshop includes twelve (12) participants, this would result in twenty-four (24) individuals in the community receiving SME programming each year. If an organization wishes to reach more individuals in the community Group Leaders will need to commit to facilitating additional workshops or additional Group Leaders will need to be identified and certified as Group Leaders.

The coordinating organization will serve as the local “hub” for SME programming in an area. Often this area will be based on the service area of the organization, but there is no limit to the number of coordinating agencies in a city, county, or any defined geographic area. Competition between coordinating organizations is strongly discouraged and KSME will actively investigate and/or mediate competition between coordinating organizations.

Coordinating organizations can access KSME support at any time and are encouraged to explore and utilize available resources. There is no charge for utilizing support resources from KSME.

In addition to designating a staff or volunteer, a coordinating organization may make contributions to the success of SME programming in numerous ways. Following are some examples:

- Providing free workshop space,
- Providing financial support through paid staff,
- Donation of workshop items (like Kleenex),

- Sending staff to training to become a Group Leader and supporting them in leading SME workshops,
- Identifying potential Group Leaders,
- Referring likely participants to workshops,
- Funding advertising for workshops in local media outlets,
- Providing technology (ie computers, printers, etc.) to support Area Program Coordinators in recruiting and other workshop activities, and
- Storing workshop materials between workshops.

The level of commitment made by each Coordinating Organization will vary, and KSME will work with each organization to promote success of SME programming.

Area Program Coordinators

The Area Program Coordinator will work closely with the coordinating organization, KSME staff, and group leaders in the area to develop SME program offerings.

There are no criteria to become an Area Program Coordinator. Area Program Coordinators may be staff or volunteers tasked by the coordinating organization to promote SME programming in their service area. **Area Program Coordinators must complete the certification training outlined on page 5 to become coordinators to ensure continuity of quality programming under the KSME standards.**

Following is a list of activities an Area Program Coordinator may do in order to develop and support ongoing SME programming in the local area:

- Identify and recruit individuals to become Group Leaders
- Become a certified Group Leader
- Identify and recruit referral sources for workshop participants
- Promote SME programming in the local service area through media outreach, presentations to organizations, and/or other marketing activities
- Establish a workshop participant recruiting program
- Identify and secure workshop locations
- Identify Group Leaders to lead workshops
- Support Group Leaders by providing support in workshop delivery
- Establish and maintain a Group Leader retention program
- Interact with referral sources, community organizations, and workshop participants to further SME programming in the local service area

Area Program Coordinators are encouraged to access KSME support at any time and are encouraged to explore and utilize available resources. There is no charge for utilizing support resources from KSME.

Appendix B | Data Collection

Following are pages are SAMPLES of the Data Collection tools used for KSME Programming. Files for production can be found at the Lead Your Health portal at leadyourhealthks.org or at the KOHP/Tomando Control Leader Resources page at kdheks.gov/arthritis/index.html. Both websites are password protected for Group Leaders and/or Area Program Coordinators. Data collection tools can also be requested by emailing KDHE (aunselt@kdheks.gov) or KFMC (healthengagement@kfmc.org). It is important to remember that all forms must be sent to the organization (license holder) for which you are facilitating your workshop under within one week of the conclusion of the last workshop meeting.

- *SME Programming Workshop*
Must be completed at least two weeks prior to start of Zero Meeting.
- *Sign In Sheet*
Must be completed at every workshop meeting, including the Zero Meeting.
- *Registration Form*
Must be completed by every participant by the conclusion of the first workshop.
- *Self-Efficacy Form*
Must be completed twice by every participant- once by the conclusion of the first workshop, and once at the conclusion of the last workshop.
- *Patient Activation Survey*
Must be completed twice by every participant- once by the conclusion of the first workshop, and once at the conclusion of the last workshop.

SME Program Scheduling Worksheet

To be completed by Area Program Coordinators and submitted to the appropriate KSME license holder as soon as possible upon scheduling a SME program but not less than two (2) weeks before a SME program starts.

Primary Contact		Cell		Email	
Phone					
Second Contact		Cell		Email	
Phone					
Group Leader Information					
Group Leader #1					
Name					
ID Number*		*If unknown, KSME can complete this information.			
Address					
City		State		Zip	
Phone		Cell		Email	
Group Leader #2					
Name					
ID Number*		*If unknown, KSME can complete this information.			
Address					
City		State		Zip	
Phone		Cell		Email	
Supplies Request					
Coordinating Organizations/Area Program Coordinators will receive a base inventory of materials for use by Group Leaders. To maximize program funding, KSME encourages monitoring supply use, donation of supplies and/or reuse of supplies (where appropriate).					
Anticipated Participants*		Workshop Item		# Requested	
		Living a Health Life with Chronic Conditions (Paperback Book)			
		Relaxation for Mind & Body Pathways to Healing (Audio CD)			
		Blank Flip Charts – 1 pad includes XX pages (for workshop charts)		pad(s)	
		Dry Erase Sheets – in packages of XX (for workshop activities)		package(s)	
		Flip Chart Markers (1 package of XX, multi-color)		package(s)	
		Dry Erase Markers (1 package of XX, multi-color)		package(s)	
		CD Player (used for activity in Workshop #3)			
		Timer (used throughout Workshop Series)			
		Clock (used throughout Workshop Series)			
		Ringer (used throughout Workshop Series)			
		Name Tag Package of 10 (includes lanyards and blank inserts)		package(s)	



Kansas Self-Management Education Program Scheduling Worksheet

Instructions: Local Area Coordinator and/or Group Leaders should complete this worksheet and return it to KDHE or KEMC at least two (2) weeks prior to the Zero (Informational) Meeting. Forms should be sent to the organization for which license you are operating under. A completed and submitted worksheet serves as confirmation of the program offering to KSME, initiates supplies being sent (if requested). (KDHE cannot offer supplies beyond books/cds until after July 2015).

Completed forms should be sent to KDHE/KEMC as follows:

Logo	Mail To	Email To
	KDHE – Self-Management Education 1000 SW Jackson, Suite 230 Topeka, KS 66612	ausnell@kdheks.gov
	KEMC – Self-Management Education 2947 SW Wanamaker Drive Topeka, KS 66614	healthengagement@kcmc.org

Coordinating Organization					
Name					
Address					
City		State		Zip	
Local Area Coordinator					
Name					
ID Number					
Address					
City		State		Zip	
Phone		Fax		Email	
Workshop Information					
Chronic Disease Self-Management Program (CDSMP)					
Diabetes Self-Management Program (DSMP)					
Tomando Control de su Salud *Offered under KDHE license only					
Programa de Manejo Personal de la Diabetes *Offered under KDHE license only					
Workshop Start Date (zero meeting)		Workshop Start Time			
Workshop End Date (week 6, or 7 weeks after zero meeting)					
Location Information					
Building Name					
Address					
City		State		Zip	

SME Program Attendance

To be completed by workshop participants each week of the workshop including the Zero Meeting.

Sign In Sheet

First and Last Name Only

Registration Form

To be completed by each participant by the conclusion of the first workshop. This data collection tool includes two pages.

**Diabetes Self-Management Education
Workshop Registration**
A Stanford University Self-Management Program

All information will be kept confidential.

First Name _____ Last Name _____
Address _____
City _____ Zip _____ County _____
Phone Number _____ Email _____

How did you hear about class? (Check as many as you want)

☐ Senior Center ☐ My doctor ☐ A friend or family member
☐ (The building where I live) ☐ Church ☐ Poster, flyer, or mailing
☐ Ad in magazine ☐ Other (tell us what) _____

Gender ☐ Male ☐ Female Birth Date _____

Please identify your race (optional)

☐ American Indian or Alaska Native ☐ Asian ☐ Black or African American
☐ Native Hawaiian or Other Pacific Islander ☐ White

Please identify your ethnicity (optional)

☐ Hispanic or Latino ☐ Not Hispanic or Latino

Do you speak a language other than English at home?

☐ Yes ☐ No ☐ Chinese ☐ Korean
☐ Spanish ☐ Other language (tell us) _____

Education Completed

☐ 8th Grade or Less ☐ Some High School ☐ High School Diploma ☐ Some College or Technical School
☐ College or Beyond ☐ Graduate or Professional Degree

What type of insurance do you have? Select all that apply:

☐ Medicare ☐ Medicaid ☐ Private ☐ Other ☐ None

Do you smoke?

☐ Yes ☐ No

Please Select One ☐ I am a Caregiver

Please check all that apply

☐ Have a Chronic Condition ☐ Alzheimer's or Related Dementia ☐ Depression or Anxiety Disorders ☐ Breathing/Lung Disease ☐ Diabetes ☐ High Cholesterol ☐ Multiple Sclerosis ☐ None

☐ Cancer ☐ Eye Disease (such as retinopathy) ☐ Heart Disease ☐ Kidney Disease ☐ Osteoporosis (low bone density) ☐ Stroke

Other Chronic Condition _____

What kind of diabetes do you have?

☐ Pre-diabetes ☐ Type 1 diabetes ☐ Type 2 diabetes
☐ I don't have diabetes ☐ I don't know

When did your doctor tell you that you have diabetes or pre-diabetes?

☐ Less than one year ago ☐ Less than two years ago ☐ Less than three years ago
☐ Less than four years ago ☐ Four or more years ago ☐ I don't know/ I don't remember

In the last year, about how many times has a doctor or nurse checked your feet?

☐ Write number of times _____ ☐ Never ☐ Don't know or not sure

Have you completed a self-management workshop before? ☐ No ☐ Yes

How would you rate your overall quality of life?

0 1 2 3 4 5 6 7 8 9 10
Poor quality Excellent quality

In general, how would you describe your health?

☐ Poor ☐ Fair ☐ Good ☐ Very Good

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Self-Efficacy Form

To be completed by each participant by the conclusion of the first workshop AND at the conclusion of the last workshop.

We would like to know how confident you are in doing certain activities. For each of the following questions, please choose the number that corresponds to your confidence that you can do the tasks regularly at the present time.



- 1. How confident are you that you can keep the fatigue caused by your disease from interfering with the things you want to do?**

1 2 3 4 5 6 7 8 9 10
Not At All Confident *Totally Confident*

- 2. How confident are you that you can keep the physical discomfort or pain of your disease from interfering with the things you want to do?**

1 2 3 4 5 6 7 8 9 10
Not At All Confident *Totally Confident*

- 3. How confident are you that you can keep the emotional distress caused by your disease from interfering with the things you want to do?**

1 2 3 4 5 6 7 8 9 10
Not At All Confident *Totally Confident*

- 4. How confident are you that you can keep any other symptoms or health problems you have from interfering with the things you want to do?**

1 2 3 4 5 6 7 8 9 10
Not At All Confident *Totally Confident*

- 5. How confident are you that you can do the different tasks and activities needed to manage your health condition so as to reduce your need to see a doctor?**

1 2 3 4 5 6 7 8 9 10
Not At All Confident *Totally Confident*

- 6. How confident are you that you can do things other than just taking medication to reduce how much your illness affects your everyday life?**

1 2 3 4 5 6 7 8 9 10
Not At All Confident *Totally Confident*

POST Survey
